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DATE: November 26, 2003

CLIENT-MATTER No.: 23546-07664
/ RTS-0266**To:**

NAME	FAX No.	PHONE No.
Examiner J. Douglas Schultz Group Art Unit 1635 U.S. Patent and Trademark Office Washington, D.C. 20231	703-872-9306	703-308-9355

FROM: Susan T. Hubl, Ph.D.
REG. NO. 47,668

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NUMBER OF PAGES WITH COVER PAGE: 16

ORIGINAL WILL NOT FOLLOW

MESSAGE:In Re: 09/960,143 – Filed September 24, 2001
in response to Office Action mailed 9/26/03

23546/07664/SF/5108607.1

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PTO/SB/21 (modified)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL FORM (to be used for all correspondence during pendency of filed application)	0001/PTO Rev. 10/95	U.S. Department of Commerce Patent and Trademark Office	Application Number	09/960,143
			Filing Date	September 24, 2001
			First Named Inventor	Brenda F. Baker
			Group Art Unit Number	1635
			Examiner Name	J. Douglas Schultz
Total Number of Pages in This Submission		16	Attorney Docket Number	23548-07664 / RTS-0266

ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) []
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<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
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<input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/>
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT	
Signature:	<i>Susan T. Hubl</i>
Attorney/Reg. No.:	Susan T. Hubl, Ph.D., Reg. No. 47,668
Dated:	November 26, 2003

CERTIFICATE OF FACSIMILE TRANSMISSION	
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Examiner J. Shultz, Group Art Unit 1635, Commissioner for Patents, at the facsimile number indicated below.	
Signature:	<i>Susan T. Hubl</i>
Typed or Printed Name:	Susan T. Hubl, Ph.D.
Dated:	November 26, 2003
Facsimile Number:	1-703-872-9306

23548/07664/SF/5108594.1

FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 110.00**Complete if Known**

Application Number	09/960,143
Filing Date	September 24, 2001
First Named Inventor	Brenda F. Baker
Examiner Name	1635
Art Unit	J. Douglas Schultz
Attorney Docket No.	23546-07664 / RTS-0266

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:

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Deposit Account Name Fenwick & West LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entry Small Entry

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$) 0**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
18	20**	0	0
Independent Claims	2	3**	0
Multiple Dependent			

Large Entry Fee Code	Large Entry Fee (\$)	Small Entry Fee Code	Small Entry Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$) 0

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entry Small Entry

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,620	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	\$110
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1256	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	185	Notice of Appeal	
1402	330	2402	185	Filing a brief in support of an appeal	
1403	280	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(g)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify) _____

SUBTOTAL (3) (\$) 110.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name (Print/Type) Susan T. Hubl

Registration No. (Attorney/Agent)

47,668

Complete (if applicable)

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Signature

Susan T. Hubl

Date

November 26, 2003

23546/07664/SF/5110907.1